

**Application Data Sheet**

**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: A PARTICLE BEAM GENERATOR

Attorney Docket Number:: HGF P-4002-1

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity:: No

Latin Name::

Variety denomination name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Secrecy Order in Parent Appl.?::

## **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Anthony  
Middle Name:: Derek  
Family Name:: Eastham  
Name Suffix::  
City of Residence:: Chester  
State or Province of Residence:: Cheshire  
Country of Residence:: United Kingdom  
Street of mailing address:: 58 Vincent Drive

City of mailing address:: Chester  
State or Province of mailing address:: Cheshire  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: CH4 7RL

Applicant Authority type::  
Primary Citizenship Country::  
Status::  
Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::

City of mailing address::

State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

Applicant Authority type::  
Primary Citizenship Country::  
Status::

Given Name::  
Middle Name::  
Family Name::  
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City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::

City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 29318  
Name::  
Street of mailing address::

City of mailing address::  
State or Province of mailing address:  
Postal or Zip Code of mailing address:  
Phone Number::

Fax Number::

E-Mail address::

### Representative Information

Representative Customer Number:: 23399

Representative Designation::	Registration Number::	Representative Name::

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/GB03/02560	6/16/03

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
GB	0213772.7	6/15/02	Yes

### Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::